									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2003  [069479]													(	
CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE OR SMALL ENTITY														
T	OTAL CLAIMS	<b>S</b>	6				<b>.</b>	RATE FEE		FEE	1	RATE	FEE	
F	OR .		NUMBER FILED		NUMBER EXTRA			BASIC FEE 385:00		385:00	OR	BASIC FEE	770.00	
T	OTAL CHARGE	ABLE CLAIMS	minus 20=		• /			X\$ 9,=		•	OR	X\$18=		
INDEPENDENT CLAIMS					• /			X43=			OR	X86=		
M	ULTIPLE DEPE	NDENT CLAIM F	RESENT					+145=			OR	+290=		
• If the difference in column 1 is less than zero, enter "0" in column 2								TOTA			OA	TOTAL		
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								L FN	ITITY	OB.	OTHER SMALL		
V		(Column 1) CLAIMS REMAINING		HIGH	EST	(Column 3)	Ìſ			ADDI-	ı i		ADDI-	
	<b>j</b> .	AFTER AMENDMENT		PREVIO	USLY	EXTRA		RATE		ONAL FEE	·	RATE	TIONAL FEE	
AMENDMENT	Total	. 8	Minus	- 2	0	<b>-</b>		X\$ 9=	7		OR	X\$18=		
E	Independent	. /	Minus		3	-		X43=	1		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	十		•	+290=		
								TOTA	_ !		OR	YOTAL	·	
	9/30/0	(Column 3)	A	ODIT. FE	EL		OR,	ADOIT. FEE						
AMENDMENT B	//	(Column 1) CLAIMS REMAINING		(Coluit	ST	PRESENT	ſſ	· - ·	TA	.IOOi-	ſ		ADDI-	
		AFTER AMENDMENT	<u> </u>	PREVIO PAID F		EXTRA		RATE		ONAL	- [	RATE	TIONAL	
	Total	. 8	Minus	- 8	2	Ę.	$\lfloor \cdot \rfloor$	X\$ 9=			OR	X\$18±		
AME	Independent	· /	Minus	/		٠		X43=	1		OR	X86=	<del></del>	
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	1		OR	+290≈		
									-	[	L	TOTAL		
ADDIT FEE CHADE											ODIT. FEE			
ď	://	CLAIMS REMAINING		HIGHE	Sî .	(Column 3)	Г	<del></del>	T AI	DDI- I	· [		ADDI-	
ENT		AFTER AMENDMENT		PREVIOUS PAID F	USLY	PRESENT . EXTRA		RATE	TIC	NAL		RATE	TIONAL	
AMENDMEN	Total	.8	Minus	-8	<u>لـ</u>	<b>.</b>		X\$ 9=			on [	X\$18=		
WE.	Independent	• /	Minus	··· /		=	<u> </u>	X43≖	T	7	OR	X86=		
口	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							. 4.45	1	$\overline{}$				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL OF TOTAL														
****	"If the "High at Number Previously Paid For" IN THIS SPACE is less than 20, error "20."  ADDIT, FEEOR ADDIT, FEE													
1	ne Tüghest Num	ber Previously Paid	For" (Total or	Independen	n) is the i	righest number	tound	sin the ap	ppropr	aate box b	n cabu	mn 1. · .		

FORM PTO-873 (Flex, 10/03)

Paters and Trademark Office, U.S. DEPARTMENT OF CONDIERCE